



01-08-09

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

11002 U.S. PTO
10/039657
12/31/01Attorney Docket No. P13477
(maximum 12 characters)First Named Inventor Andrew S. GroverTitle: METHOD AND APPARATUS FOR CONFIGURING A COMPUTER SYSTEM BASED ON USER DISTANCEExpress Mail Label No. EJ201093392USADDRESS TO: **Assistant Commissioner for Patents**
Box Patent Application
Washington, D.C 20231**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. **Fee Transmittal Form (e.g., PTO/SB/17)**
(Submit an original, and a duplicate for fee processing)
2. **Applicant Claims Small Entity Status. (37 CFR 1.27)**
3. **Specification (Total Pages 16)**
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. **Drawings(s) (35 USC 113) (Total Sheets 3)**
5. **Oath or Declaration (Total Pages 3)**
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. **DELETIONS OF INVENTOR(S)** Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
 - c. Unsigned.
6. **Application Data Sheet. (37 CFR 1.76)**
7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. **Nucleotide and/or Amino Acid Sequence Submission**
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
- c. Statement verifying identity of above copies

FEE TRANSMITTAL FOR FY 2002

TOTAL AMOUNT OF PAYMENT (\$) 758.00

Complete if Known:

Application No. Not Yet Assigned

Filing Herewith

First Named Inventor Andrew S. GroverGroup Art Unit Not Yet AssignedExaminer Name Not Yet AssignedAttorney Docket No. P13477

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 50-0221
 Deposit Account Name Intel Corporation

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. Payment Enclosed:

Check
 Money Order
 Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity | Small Entity | Fee | Fee | Fee | Fee | Fee Description | Fee Paid |
|-------------------------------|--------------|----------|----------|------------------------------------|-----|-----------------|---------------|
| Code | Code | Fee (\$) | Fee (\$) | Fee | Fee | | |
| 101 | 201 | 740 | 370 | Utility application filing fee | | | <u>740.00</u> |
| 106 | 206 | 330 | 165 | Design application filing fee | | | |
| 107 | 207 | 510 | 255 | Plant filing fee | | | |
| 108 | 208 | 740 | 370 | Reissue filing fee | | | |
| 114 | 214 | 160 | 80 | Provisional application filing fee | | | |
| SUBTOTAL (1) \$ <u>740.00</u> | | | | | | | |

2. EXTRA CLAIM FEES

| | Extra Claims | Fee from below | Fee Paid |
|----------------------|--------------|----------------|----------|
| Total Claims 21 | - 20** = 1 | X 18.00 | = 18.00 |
| Independent Claims 3 | - 3** = 0 | X 84.00 | = |
| Multiple Dependent | | | = |

**Or number previously paid, if greater; For Reissues, see below.

| Large Entity | Small Entity | Fee | Fee | Fee | Fee | Fee Description |
|--------------|--------------|----------|----------|---|-----|-----------------|
| Code | Code | Fee (\$) | Fee (\$) | Fee | Fee | |
| 103 | 203 | 18 | 9 | Claims in excess of 20 | | |
| 102 | 202 | 84 | 42 | Independent claims in excess of 3 | | |
| 104 | 204 | 280 | 140 | Multiple dependent claim, if not paid | | |
| 109 | 209 | 84 | 42 | **Reissue independent claims over original patent | | |
| 110 | 210 | 18 | 9 | **Reissue claims in excess of 20 and over original patent | | |

SUBTOTAL (2) \$ 18.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

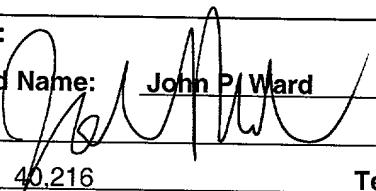
| Large Entity Fee Code | Fee (\$) | Small Entity Fee Code | Fee (\$) | Fee Description | Fee Paid |
|-----------------------------|-------------|-----------------------------|-------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 099 | 8,800 | 099 | 8,800 | Request for inter partes reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for response within first month | |
| 116 | 400 | 216 | 200 | Extension for response within second month | |
| 117 | 920 | 217 | 460 | Extension for response within third month | |
| 118 | 1,440 | 218 | 720 | Extension for response within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for response within fifth month | |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive unavoidably abandoned application or unavoidably delayed payment of issue fee | |
| 141 | 1,280 | 241 | 640 | Petition to revive unintentionally abandoned application or unintentionally delayed payment of issue fee | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 | 370 | For filing a submission after final rejection (see 37 CFR 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (see 37 CFR 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |
| Other fee (specify) | | | | | |
| Other fee (specify) | | | | | |

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$ 0

SUBMITTED BY:

Typed or Printed Name: John P. Ward

Signature:  Date: 12/31/01

Reg. Number: 40,216 Telephone Number: 408-720-8300

EXPRESS MAIL CERTIFICATE OF MAILING

"Express Mail" mailing label number: EJ201093392US

Date of Deposit: 12/31/01

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

(Date signed)

| | | | |
|--|--|--------------------|----------|
| Serial/Patent No. | *** | Filing/Issue Date: | Herewith |
| Client: | Intel Corporation | | |
| Title: | METHOD AND APPARATUS FOR CONFIGURING A COMPUTER SYSTEM BASED ON USER DISTANCE | | |
| BSTZ File No. | P13477 | | |
| Date Mailed: | 12/31/01 | | |
| The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon: | | | |
| <input checked="" type="checkbox"/> Amendment/Response (____ pgs.) <input type="checkbox"/> Express Mail No.: EJ201093392US <input type="checkbox"/> Check No. _____ | | | |
| <input type="checkbox"/> Appeal Brief (16 pgs.) (in triplicate) <input type="checkbox"/> _____ Month(s) Extension of Time <input type="checkbox"/> Amt: _____ | | | |
| <input checked="" type="checkbox"/> Application - Utility (____ pgs. with cover and abstract) <input type="checkbox"/> Information Disclosure Statement & PTO-149 (____ pgs.) <input type="checkbox"/> Check No. _____ | | | |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Application - Design (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Application - PCT (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Application - Provisional (____ pgs.) <input type="checkbox"/> _____ Amt: _____ | | | |
| <input checked="" type="checkbox"/> Assignment and Cover Sheet <input type="checkbox"/> Postcard <input type="checkbox"/> Power of Attorney (____ pgs.) | | | |
| <input checked="" type="checkbox"/> Certificate of Mailing Express Mail <input type="checkbox"/> Preliminary Amendment (____ pgs.) | | | |
| <input checked="" type="checkbox"/> Declaration & POA (3 pgs.) unsigned <input type="checkbox"/> Reply Brief (____ pgs.) | | | |
| <input type="checkbox"/> Disclosure Docs & Org & Cpy of Inventor Signed Letter (____ pgs.) <input type="checkbox"/> Response to Notice of Missing Parts | | | |
| <input checked="" type="checkbox"/> Drawings (3 # of sheets includes 4 figures) <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | | | |
| <input checked="" type="checkbox"/> Transmittal Letter, in triplicate Utility 2 Pgs <input type="checkbox"/> _____ Amt: _____ | | | |
| <input checked="" type="checkbox"/> Fee Transmittal, in triplicate 2 Pgs <input type="checkbox"/> _____ Amt: _____ | | | |
| <input type="checkbox"/> Other: _____ | | | |